

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

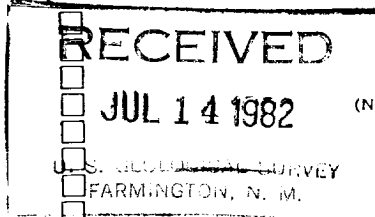
1. oil ☒ well gas ☐ well other ☐2. NAME OF OPERATOR
Dugan Production Corp.3. ADDRESS OF OPERATOR
P.O. Box 208, Farmington, NM 874014. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 500' FNL - 2000' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

☐ TEST WATER SHUT-OFF
☐ FRACTURE TREAT
☐ SHOOT OR ACIDIZE
☐ REPAIR WELL
☐ PULL OR ALTER CASING
☐ MULTIPLE COMPLETE
☐ CHANGE ZONES
☐ ABANDON*
(other) ☐

SUBSEQUENT REPORT OF:



XX Spud & surface casing

5. LEASE
NM 10758

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Pittam Pond9. WELL NO.
#310. FIELD OR WILDCAT NAME
Cha Cha Gallup11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 11 T29N R15W12. COUNTY OR PARISH
San Juan13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5172' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

7-8-82 Spudded 12½" hole at 10:45 p.m. 7-7-82.

7-10-82 Finished drlg. 12½" hole to 181'. Ran 6 jts. 8-5/8" O.D., 24#, 8 Rd, ST&C casing. T.E. 162' set at 174' RKB. Cemented with 275 sx class "B" w/ 2% CaCl (324.5 cu.ft.)

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

Thomas A. Dugan

TITLE Petroleum Engineer DATE 7-13-82

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

NMOCC

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

JUL 19 1982

FARMINGTON DISTRICT

BY sm